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ABSTRACT

To contribute to an overall perception of their field, it is suggested that students preparing to become health educators undertake the task of writing a biography of a prominent health educator. It is pointed out that biographical research can present to the student a realistic and objective account of the life and thoughts of an individual who has been successful in the profession they aspire to. A method of selecting a suitable subject of such a biography is described. The criteria and methodology for biographical research are discussed, and possible problems are considered. (JD)

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BIOGRAPHICAL RESEARCH IN HEALTH EDUCATION

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Health education has reached a point in its development as a profession to merit a critical study of its past. In addition to teaching health education students the knowledges and strategies needed to procede forward within the health education field, there is also a need to add depth and perspective to their education by looking backward. In other words, awareness of events, individuals, and philosophies which have preceded the current day health educator will help to contribute to their overall perception of what it is to be a health educator.

Biographical research can contribute to this goal by presenting a realistic and objective account of the accomplishments of individuals as they functioned in their own time and their own setting. As Nevins (1938) has stated, there is a need for biography because it "humanizes the past and enriches personal experiences of the present in a way that history can seldom do." To be able to go back in time and put together in one study the sum total of an individual's impact on a profession is, in my opinion, a meaningful research project. To record dates in chronological order can be a simple enough task, but to bring your subject to life on paper is another matter." Kendall (1965) stated what I think should be the aim of every biographical study, and that is "to elicit from the coldness of paper, the warmth of a life being lived..." There are individuals who have given much to health education, and it would benefit all of us in the profession to have their efforts known and recorded for future reference. Conversely, it would be to our professional deteriment to allow these people to slip into obscurity to be "forgotten or exist only in dry eulogy or brief paragraphs of . . .

textbooks." (Bowen, 1969). The current generation of health educators should have the opportunity to know the individuals behind the chronological listing of accomplishments.

Selecting a Subject

You need to select an individual worthy of being researched. The means by which you decide whether or not this person is worthy is still uncertain. Subjective evaluation by the graduate student and his/her supervisory committee can be made regarding the individual's total participation in the profession from the local level all the way through to the international level. Whatever method is used, however, it is important that the subject of any biographical research be carefully selected. To do a study on an individual of questionable qualifications belittles the degree as well as the research.

In 1976, a physical education dissertation completed by Carolyn K. Bell at the University of Utah developed a score card for use in evaluating physical education leaders. The score card has nine major units.

1. Age
2. Education
3. Professional Service
4. Professional Organizations
5. Community Service and Organizations
6. Authorship
7. Addresses, Speeches, and Lectures
8. Creative Projects
9. Honors and Awards

Based on applying her score card to 27 completed biographical dissertations, Dr. Bell recommended that a minimum standard of 3,000 points be earned by individuals to merit biographical study. Consideration by the graduate student and his/her supervisory committee would have to be given to the possibility of an individual earning the majority of points in one, or perhaps two of the nine major units. According to Bell, variety of contribution would need to be as important as volume of production.

I applied Bell's score card to my already completed study of Dr. Delbert Oberteuffer of The Ohio State University (Grosshans, 1975). As is typical of many health educators from the past, Dr. Oberteuffer did not restrict his professional activity solely to health education. Therefore, the score card could be easily adjusted to evaluate his accomplishments in both fields. Dr. Oberteuffer earned approximately 11,200 points. The majority of his points were earned in the following four categories:

1. Addresses, Speeches, and Lectures, (6400 points)
2. Professional Service, (1890 points)
3. Professional Organizations, (1600 points)
4. Authorship, (770 points)

One reason for the low score in the authorship category might be due to a possible weakness in the score card. Although Dr. Oberteuffer has had two textbooks which have eleven editions between them, only the two original publications received points. If a book has sufficient demand to warrant numerous editions, then the scoring, appropriately rated, should reflect this merit. Also, I believe a point difference

needs to exist for sole authorship and co-authorship of books and articles.

Using this score card, it was obvious that Dr. Oberteuffer's major contributions came in the areas of speaking, service, and professional organizations, with authorship a respectable fourth place. To record these accomplishments, and in Dr. Oberteuffer's case, he kept meticulous records of speeches, would be a matter of listing his addresses, the group he spoke to, the date, and the topic of the presentation. Dr. Oberteuffer also noted the approximate size of the crowd so I could report that he addressed audiences that ranged from as few as 15, to as many as 6800 people. The problem I encountered was how to present this charismic man on paper as he was known to his friends, students and colleagues, and remain objective.

To solve this problem, I tried to make my study comprehensive by interviewing as many people as possible who knew Dr. Oberteuffer in different capacities. Thus, I gathered information from Dr. Oberteuffer's wife, his brother, several childhood friends and classmates (including former Supreme Court Justice William O. Douglas), former students, former colleagues, old friends, new friends, persons who worked for Dr. Oberteuffer, and persons for whom Dr. Oberteuffer worked. Also, once I got into the actual biography, I did not refer to Dr. Oberteuffer as "the subject of the study." Dr. Oberteuffer was more commonly known among his friends and colleagues as "Obie." Therefore, I used his nickname whenever it fit the situation.

Furthermore, I tried to be realistic when describing Dr. Oberteuffer's life. Realizing that no individual is perfect, I attempted to pull from all my interviews a consensus of opinion regarding Dr. Oberteuffer's

professional strengths and weaknesses. Obviously, if the individual has sufficient background to merit a biographical study, positive traits and strengths will surpass negative traits and weaknesses. Nonetheless, recognizing and commenting upon known limitations and/or weaknesses does not detract from the person or the study. It does just the opposite as it demonstrates that your subject was human, you were aware of it, and you recorded the facts in an objective manner.

Criteria For Biographical Research

As any researcher will tell you, your task is to report the facts as you find them. In biographical research, your facts, in many instances, are the opinions of the people interviewed or contacted by letter. To provide the researcher with a set of criteria for evaluating information, historical research has external criticism, internal criticism, and primary and secondary sources.

Primary sources are the original materials, secondary sources are descriptions of primary sources. External criticism refers to the reliability and authenticity of the witnesses. How genuine are the sources? Could the sources be forged or changed by others to pass censor? In other words, is what is stated a reliable and authentic description of what really occurred. The purpose of internal criticism is to determine the relationship of the conception and affirmation of the witnesses to what actually happened. In my dissertation, I adapted the following nine questions by Van Dalen (1964) to determine the internal criticism of my study.

1. Was the position, location, or association of the contributor favorable for observing the conditions he reported?

2. Did emotional stress, age, or health conditions cause the contributor to make faulty observations, or an inaccurate report?

3. Did the contributor report on direct observation, heresay, or borrowed source material?

4. Did the contributor write the document at the time of the observation or weeks or years later?

5. Did the contributor write from carefully prepared notes of observation or from memory?

6. Did the contributor have biases concerning any person, professional body, period of history, old or new teaching methods, educational philosophy, or activity that influenced his writing?

7. Was the objective of the contributor to win the approval of succeeding generations or to please or antagonize some group?

8. Did the contributor contradict himself?

9. Are there accounts by other independent, competent observers that agree with the report of the contributor?

Problems in Biographical Research

There are unique problems associated with biographical research. For instance, some of the limitations of my study were: the possibility that an important source of information was overlooked; the possibility that the memory of the contributor mellowed with the passing of time; the author being unable to interview individuals who could make valuable contributions to the study; and the fact that Dr. Oberteuffer was alive (and still is) at the time of the study may have influenced the responses of some of the contributors.

The review of literature also posed a problem. It necessitated that I look at the method of doing biographical research as opposed to the content closely related to my study. It is readily apparent that if a study were already completed regarding Dr. Oberteuffer's professional achievements, I would not be doing an original research project. As a result of this complication, I centered my review of literature upon the approaches utilized by a variety of persons who had completed biographical dissertations within the areas of health education and physical education. In addition to the questions I had regarding research design for this type of study, I was also curious about such things as how does one divide a life into chapters; how much of an individual's personal life should be revealed and recorded; does one's private life have a significant impact upon his professional life, and should that impact be noted; and, to what extent does the subject, if alive at the time of the study, have control over what appears in the final copy?

I found solving these questions frustrating but challenging. It helped to be able to draw on my own personal interest in biographies as a guide to how I wanted to develop, design, and describe Delbert Oberteuffer on paper. I knew what I liked in a good biography so I tried to duplicate that style in my own dissertation. Also, I referred to several books (Bowen, 1969; Kendall, 1965; Nevins, 1938) that dealt with actually writing a biography.

Another problem, although not so unusual, is the organization and interpretation of the data. How do you begin to put into workable order the tapes, letters, transcripts, photographs, speeches, books,

articles, awards, etc., that you have gathered together as a result of your research efforts. Organization is the key. Knowing not only your exact chapter breakdowns, but also the order in which the information in each chapter will be used is extremely important. Then, you can file this information into folders marked by whatever system makes sense to you. Other helpful factors are patientce, supportive friends, a room where you can spread everything out and leave it until the study is completed, and perhaps a devoted puppy who is quiet when you need quiet, but who is there when you need a companion for a "clearing your head" walk.

The Fringe Benefits

In retrospect, I can cite several benefits that can be reaped from doing a biographical study, in addition to the usual attainment of advanced knowledge and/or skill culminating in a graduate degree. The foundation of any benefit, however, is your subject. If your individual has been involved in varied professional pursuits, then you, the researcher, have a greater opportunity of coming into contact with an equally varied amount of content, including people from past and present generations in health education. Just being able to sit down and talk with people who have had an impact on the profession gives the researcher a broader, more personal sense of perception of health education. With Dr. Oberteuffer, I was able to come into contact with many noted health educators. In some cases I have continued the associations, while with others, I am pleased to have had the opportunity to meet and interview them.

Also, if your individual was quite a character, then your research would most likely be exciting and revealing. I know that I was never bored with tracing Dr. Oberteuffer's professional achievements. He was not a man to avoid a controversial issue for the sake of peace and contentment. As a result, my interviews were usually replete with stories about confrontations or lively defenses of viewpoints held by Dr. Oberteuffer.

Last, but no least, my study enabled me to become acquainted with Delbert Oberteuffer. Many opinions that I hold regarding health education can be traced to either agreeing or disagreeing with this man. My dissertation subject talked back to me, challenged me, encouraged me, and eventually congratulated me. Not every researcher can say that about the subject of their study.

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